

CLAIMS ONLY

Application Number
1010000577

Filing Date

Applicant(s)

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17	1					
18		1				
19						
20						
21		1				
22						
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24						
25						
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41						
42						
43						
44						
45						
46						
47						
48						
49						
50						
Total Indep	8					
Total Depend						
Total Claims						

	*		*		*	
	Indep	Depend	Indep	Depend	Indep	Depend
51		1				
52	1					
53						
54						
55						
56						
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94						
95						
96						
97						
98						
99						
100						
Total Indep	2					
Total Depend	23					
Total Claims	25					